

EXHIBIT “D”

FOR TAX YEAR 2018

AMERIWAY CORPORATION

Sara Sam CPA PC
2424 E York Street 301C
Philadelphia, PA 19125
(215) 667-8839

Sara Sam CPA PC

2424 E York Street 301C
Philadelphia, PA 19125
sara@sarasamcpa.com
Phone: (215)667-8839 | Fax: (215)695-2376

February 10, 2020

AMERIWAY CORPORATION
2424 E YORK ST, STE 223
Philadelphia, PA 19125

AMERIWAY CORPORATION:

Enclosed is the 2018 Philadelphia Business Income and Receipts Tax return, prepared for AMERIWAY CORPORATION from the information provided. This return will be e-filed with the Philadelphia taxing authority.

The corporation's Philadelphia Business Income and Receipts Tax return reflects a balance due of \$1,441.

Make this payment on or before April 15, 2019. If not paying electronically, mail your payment to the following address:

Philadelphia Department of Revenue
PO Box 1393
Philadelphia, PA 19105-1393
(Payable to City of Philadelphia)

The corporation's Philadelphia Business Income and Receipts Tax estimated payments have been prepared for the 2019 tax year. The corporation's Philadelphia Business Income and Receipts Tax estimate details by quarter are as follows:

1st Quarter : \$1,060 due on April 15, 2019

If not paying electronically, mail each payment separately with the corresponding voucher on or before the due date to the following address:

Philadelphia Department of Revenue
PO Box 1393
Philadelphia, PA 19105-1393
(Payable to City of Philadelphia)

Thank you for the opportunity to be of service. For further assistance with your tax needs, contact our office at (215)667-8839.

Sincerely,

Sara Sam
Sara Sam CPA PC

Amended U.S. Corporation Income Tax Return

For tax year ending

► 12-2018

(Enter month and year.)

Please Type or Print	Name AMERIWAY CORPORATION UNITED E-LOGISTICS CORPORATION Number, street, and room or suite no. If a P.O. box, see instructions. 2424 E YORK ST City or town, state, and ZIP code Philadelphia PA 19125	Employer identification number 81-4134438
	Telephone number (optional)	
	Enter name and address used on original return. If same as above, write "Same." SAME	

Internal Revenue Service Center
where original return was filed

Fill in applicable items and use Part II on page 2 to explain any changes

Part I	Income and Deductions (see instructions)	(a) As originally reported or as previously adjusted	(b) Net change - increase or (decrease) - explain in Part II	(c) Correct amount
1	Total income	1	848,839	848,839
2	Total deductions	2	679	931,614
3	Taxable income. Subtract line 2 from line 1	3	(679)	(82,775)
4	Total tax	4		(83,454)

Payments and Credits (see instructions)

5a	Overpayment in prior year allowed as a credit	5a		
b	Estimated tax payments	5b		
c	Refund applied for on Form 4466	5c		
d	Subtract line 5c from the sum of lines 5a and 5b	5d		
e	Tax deposited with Form 7004	5e		
f	Credit from Form 2439	5f		
g	Credit for federal tax on fuels and other refundable credits	5g		
6	Tax deposited or paid with (or after) the filing of the original return	6		
7	Add lines 5d through 6, column (c)	7		
8	Overpayment, if any, as shown on original return or as later adjusted	8		
9	Subtract line 8 from line 7	9		

Tax Due or Overpayment (see instructions)

10	Tax due. Subtract line 9 from line 4, column (c). If paying by check, make it payable to the "United States Treasury"	► 10
11	Overpayment. Subtract line 4, column (c), from line 9	► 11
12	Enter the amount of line 11 you want: Credited to 20 Estimated tax ► Refunded ►	12

Sign Here	Under penalties of perjury, I declare that I have filed an original return and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	XIYAN ZHANG Signature of officer	Date	CEO Title

Paid Preparer Use Only	Preparer's signature Sara Sam Print/Type preparer's name Sara Sam Firm's name ► Sara Sam CPA PC Firm's address ► 2424 E York Street 301C Philadelphia PA 19125	Date 02-10-2020	Check <input type="checkbox"/> if self-employed PTIN P01602029
		Firm's EIN ► 47-1500758	Phone no. (215) 667-8839

Part II

Explanation of Changes to Items in Part I (Enter the line number from Part I for the items you are changing, and give the reason for each change. Show any computation in detail. Also, see **What To Attach** in the instructions.)

If the change is due to a net operating loss carryback, a capital loss carryback, or a general business credit carryback, see

Carryback Claims in the instructions, and check here □

ORIGINALLY FILED INCOMPLETE VERSION OF THE TAX RETURN. ALL LINE

ITEMS ARE UPDATED TO REFELCT THE CORRECT TRANSACTIONS.

Department of the Treasury
Internal Revenue Service

U.S. Corporation Income Tax Return

Case 1:19-cv-09407-VSB-VF Document 151-4 Filed 07/08/22 Page 6 of 22

2018

For calendar year 2018 or **tax** year beginning **, 2018, ending** **, 20**
► Go to www.irs.gov/Form1120 for instructions and the latest information.

A Check if:	Name		B Employer identification number
1a Consolidated return (attach Form 851) <input type="checkbox"/>	AMERIWAY CORPORATION		81-4134438
b Life/nonlife consolidated return <input type="checkbox"/>	UNITED E-LOGISTICS CORPORATI		C Date incorporated
2 Personal holding co. (attach Sch. PH) <input type="checkbox"/>	Number, street, and room or suite no. If a P.O. box, see instructions STE 223		10-14-2016
3 Personal service corp. (see instructions) <input type="checkbox"/>	2424 E YORK ST		D Total assets (see instructions)
4 Schedule M-3 attached <input type="checkbox"/>	City or town, state or province, country and ZIP or foreign postal code Philadelphia PA 19125		\$ 52,531
E Check if: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change			

Income	1a Gross receipts or sales	1a 848,839	
	b Returns and allowances	1b	
	c Balance. Subtract line 1b from line 1a		
	2 Cost of goods sold (attach Form 1125-A)		
	3 Gross profit. Subtract line 2 from line 1c		
	4 Dividends and inclusions (Schedule C, line 23, column (a))		
	5 Interest		
	6 Gross rents		
	7 Gross royalties		
	8 Capital gain net income (attach Schedule D (Form 1120))		
	9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)		
10 Other income (see instructions - attach statement)			
11 Total income. Add lines 3 through 10	848,839		
Deductions (See instructions for limitations on deductions.)	12 Compensation of officers (see instructions - attach Form 1125-E)	12	
	13 Salaries and wages (less employment credits)	13	
	14 Repairs and maintenance	14	
	15 Bad debts	15	
	16 Rents	16	
	17 Taxes and licenses	17	
	18 Interest (see instructions)	18	
	19 Charitable contributions	19	
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20	
	21 Depletion	21	
	22 Advertising	22	
	23 Pension, profit-sharing, etc., plans	23	
	24 Employee benefit programs	24	
	25 Reserved for future use	25	
	26 Other deductions (attach statement)	26 932,293	
	27 Total deductions. Add lines 12 through 26	932,293	
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11.	(83,454)	
29a Net operating loss deduction (see instructions)	29a		
b Special deductions (Schedule C, line 24, column (c))	29b		
c Add lines 29a and 29b			
30 Taxable income. Subtract line 29c from line 28. See instructions	30 (83,454)		
31 Total tax (Schedule J, Part I, line 11)	31 0		
32 2018 net 965 tax liability paid (Schedule J, Part II, line 12)	32		
33 Total payments, credits, and section 965 net tax liability (Schedule J, Part III, line 23)	33		
34 Estimated tax penalty. See instructions. Check if Form 2220 is attached	34		
35 Amount owed. If line 33 is smaller than the total of lines 31, 32, and 34, enter amount owed	35		
36 Overpayment. If line 33 is larger than the total of lines 31, 32, and 34, enter amount overpaid	36		
37 Enter amount from line 36 you want: Credited to 2019 estimated tax ►	Refunded ►		

Tax, Refundable Credits, & Payments Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	XIYAN ZHANG	Date	CEO	Title	May the IRS discuss this return with the preparer shown below? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Signature of officer				

Paid Preparer Use Only	Print/Type preparer's name Sara Sam	Preparer's signature Sara Sam	Date 02-10-2020	Check <input type="checkbox"/> if self-employed	PTIN P01602029
	Firm's name ► Sara Sam CPA PC			Firm's EIN ► 47-1500758	
	Firm's address ► 2424 E York Street 301C			Phone no.	
				(215) 667-8839	

For Paperwork Reduction Act Notice, see separate Instructions.
EEA

AMERIWAY - 007757820 (2018)

HIGHLY CONFIDENTIAL ATTORNEY'S EYES ONLY

Form 1120 (2018)

AMERIWAY CORPORATION**81-4134438****Page 2**

Schedule C	Dividends, Inclusions, and Special Deductions (see instructions)	(a) Dividends and inclusions	(b) %	(c) Special deductions (a) x (b)
1	Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		50	
2	Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		65	
3	Dividends on certain debt-financed stock of domestic and foreign corporations	see instructions		
4	Dividends on certain preferred stock of less-than-20%-owned public utilities		23.3	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs		50	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs		65	
8	Dividends from wholly owned foreign subsidiaries		100	
9	Subtotal. Add lines 1 through 8. See instructions for limitations	see instructions		
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11	Dividends from affiliated group members		100	
12	Dividends from certain FSCs		100	
13	Foreign-source portion of dividends received from a specified 10%-owned foreign corporation (excluding hybrid dividends) (see instructions)		100	
14	Dividends from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 (including any hybrid dividends)			
15	Section 965(a) inclusion	see instructions		
16a	Subpart F inclusions derived from the sale by a controlled foreign corporation (CFC) of the stock of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) (see instructions)		100	
b	Subpart F inclusions derived from hybrid dividends of tiered corporations (attach Form(s) 5471) (see instructions)			
c	Other inclusions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 (attach Form(s) 5471) (see instructions)			
17	Global Intangible Low-Taxed Income (GILTI)(attach Form(s) 5471 and Form 8992)			
18	Gross-up for foreign taxes deemed paid			
19	IC-DISC and former DISC dividends not included on line 1, 2, or 3			
20	Other dividends			
21	Deduction for dividends paid on certain preferred stock of public utilities.			
22	Section 250 deduction (attach Form 8993)			
23	Total dividends and inclusions. Add lines 9 through 20. Enter here and on page 1, line 4			
24	Total special deductions. Add lines 9 through 22, column (c). Enter here and on page 1, line 29b ►			

EEA

Form 1120 (2018)

Schedule J Tax Computation and Payment (see instructions)**Part I - Tax Computation**

1 Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions ► <input type="checkbox"/>		
2 Income tax. See instructions	2	0
3 Base erosion minimum tax (attach Form 8991)	3	
4 Add lines 2 and 3	4	0
5a Foreign tax credit (attach Form 1118)	5a	0
b Credit from Form 8834 (see instructions)	5b	
c General business credit (attach Form 3800)	5c	
d Credit for prior year minimum tax (attach Form 8827)	5d	
e Bond credits from Form 8912	5e	
6 Total credits. Add lines 5a through 5e	6	
7 Subtract line 6 from line 4	7	0
8 Personal holding company tax (attach Schedule PH (Form 1120))	8	0
9a Recapture of investment credit (attach Form 4255)	9a	
b Recapture of low-income housing credit (attach Form 8611)	9b	
c Interest due under the look-back method - completed long-term contracts (attach Form 8697)	9c	
d Interest due under the look-back method - income forecast method (attach Form 8866)	9d	
e Alternative tax on qualifying shipping activities (attach Form 8902)	9e	
f Other (see instructions - attach statement)	9f	
10 Total. Add lines 9a through 9f	10	
11 Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	0

Part II - Section 965 Payments (see instructions)

12 2018 net 965 tax liability paid from Form 965-B, Part II, column (k), line 2. Enter here and on page 1, line 32 ..	12	
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Part III - Payments, Refundable Credits, and Section 965 Net Tax Liability

13 2017 overpayment credited to 2018	13	
14 2018 estimated tax payments	14	
15 2018 refund applied for on Form 4466	15	()
16 Combine lines 13, 14, and 15	16	
17 Tax deposited with Form 7004	17	
18 Withholding (see instructions)	18	
19 Total payments. Add lines 16, 17, and 18	19	
20 Refundable credits from:		
a Form 2439	20a	
b Form 4136	20b	
c Form 8827, line 8c	20c	
d Other (attach statement - see instructions)	20d	
21 Total credits. Add lines 20a through 20d	21	
22 2018 net 965 tax liability from Form 965-B, Part I, column (d), line 2. See instructions	22	
23 Total payments, credits, and section 965 net tax liability Add lines 19, 21, and 22. Enter here and on page 1, line 33	23	

Schedule K**Other Information (continued from page 4)**

- 13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the **tax year** and its total assets at the end of the **tax year** less than \$250,000? Yes No
- If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the **tax year** ► \$ _____
- 14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain **Tax** Position Statement? See instructions Yes No
- If "Yes," complete and attach Schedule UTP.
- 15a Did the corporation make any payments in 2018 that would require it to file Form(s) 1099? Yes No
- b If "Yes," did or will the corporation file required Forms 1099? Yes No
- 16 During this **tax year**, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock? Yes No
- 17 During or subsequent to this **tax year**, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a **taxable**, **non-taxable**, or **tax** deferred transaction? Yes No
- 18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million? Yes No
- 19 During the corporation's **tax year**, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code? Yes No
- 20 Is the corporation operating on a cooperative basis? Yes No
- 21 During the **tax year**, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions Yes No
- If "Yes," enter the total amount of the disallowed deductions ► \$ _____
- 22 Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding **tax years**? (See sections 59A(e)(2) and (3)) Yes No
- If "Yes," complete and attach Form 8991.
- 23 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the **tax year**? See instructions Yes No
- 24 Does the corporation satisfy **one** of the following conditions and the corporation does not own a pass-through entity with current year, or prior year carryover, excess business interest expense? See instructions Yes No
- a The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 **tax years** preceding the current **tax year** do not exceed \$25 million, and the corporation is not a **tax shelter**, or
- b The corporation only has business interest expense from (1) an electing real property trade or business, (2) an electing farming business, or (3) certain utility businesses under section 163(j)(7).
- If "No," complete and attach Form 8990.
- 25 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund? Yes No
- If "Yes," enter amount from Form 8996, line 13 ► \$ _____

Form 1120 (2018)

AMERIWAY CORPORATION

81-4134438

Page 6

Schedule L	Balance Sheets per Books	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
1 Cash			43,564		52,531
2a Trade notes and accounts receivable					
b Less allowance for bad debts	()			()	
3 Inventories					
4 U.S. government obligations					
5 Tax-exempt securities (see instructions)					
6 Other current assets (attach statement)					
7 Loans to shareholders					
8 Mortgage and real estate loans					
9 Other investments (attach statement)					
10a Buildings and other depreciable assets					
b Less accumulated depreciation	()			()	
11a Depletable assets					
b Less accumulated depletion	()			()	
12 Land (net of any amortization)					
13a Intangible assets (amortizable only)					
b Less accumulated amortization	()			()	
14 Other assets (attach statement)					
15 Total assets			43,564		52,531
Liabilities and Shareholders' Equity					
16 Accounts payable			23,514		38,520
17 Mortgages, notes, bonds payable in less than 1 year .					
18 Other current liabilities (attach statement)					
19 Loans from shareholders					
20 Mortgages, notes, bonds payable in 1 year or more . .					
21 Other liabilities (attach statement)					
22 Capital stock: a Preferred stock					
b Common stock	100		100	100	100
23 Additional paid-in capital			204,707		282,122
24 Retained earnings-Appropriated (attach statement) . .					
25 Retained earnings-Unappropriated			(184,757)		(268,211)
26 Adjustments to shareholders' equity (attach statement)					
27 Less cost of treasury stock			()		()
28 Total liabilities and shareholders' equity			43,564		52,531

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	(83,454)	7 Income recorded on books this year not included on this return (itemize): Tax-exempt interest \$ _____	
2 Federal income tax per books			
3 Excess of capital losses over capital gains			
4 Income subject to tax not recorded on books this year (itemize): _____			
5 Expenses recorded on books this year not deducted on this return (itemize):		8 Deductions on this return not charged against book income this year (itemize):	
a Depreciation \$ _____		a Depreciation \$ _____	
b Charitable contributions \$ _____		b Charitable contributions \$ _____	
c Travel and entertainment \$ _____			
6 Add lines 1 through 5	(83,454)	9 Add lines 7 and 8	
		10 Income (page 1, line 28)-line 6 less line 9	(83,454)

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	(184,757)	5 Distributions: a Cash	
2 Net income (loss) per books	(83,454)	b Stock	
3 Other increases (itemize): _____		c Property	
4 Add lines 1, 2, and 3	(268,211)	6 Other decreases (itemize): _____	
		7 Add lines 5 and 6	
		8 Balance at end of year (line 4 less line 7)	(268,211)

SCHEDULE G
(Form 1120)

(Rev. December 2011)
Department of the Treasury
Internal Revenue Service

Information on Certain Persons Owning the Corporation's Voting Stock

OMB No. 1545-0123

► Attach to Form 1120.

► See instructions.

Name _____

Employer identification number (EIN)

AMERIWAY CORPORATION

81-4134438

Part I **Certain Entities Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

Part II **Certain Individuals and Estates Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

Federal Supporting Statements		2018 PG01
Name(s) as shown on return		Tax ID Number
<u>AMERIWAY CORPORATION</u>		81-4134438
Form 1120 - Line 26 - Other Deductions		Statement #5
Description		Amount
Freight		871,406
Independent Contractor		44,100
Legal and professional		1,358
Permits and fees		617
Travel		7,244
OTHER BUSINESS EXP		7,568
Total		<u>932,293</u>

**Form 1120-C, Schedule G, Line 9a, Column (a),
Patronage NOL Deduction**

(Keep for your records)

2018

Name(s) as shown on return

AMERIWAY CORPORATION

Tax ID Number

81-4134438

Year	Loss Carryover/ Carryback	Increase of NOL Due to Sec 170(d)(2)(B) Contribution Reduction*	Loss Applied to 2018	Unused Loss	Unused Sec 170(d)(2)(B)
1998				Expiring this year	Expiring this year
1999					
2000					
2001					
2002					
2003					
2004					
2005					
2006					
2007					
2008					
2009					
2010					
2011					
2012					
2013					
2014					
2015					
2016	99,079			99,079	
2017	85,678			85,678	
	Current year NOL		Applied to Prior Years	Remaining 2018 NOL carryover	
2018	83,454			83,454	
	Future years NOL		Applied to 2018		
Future Years					
TOTALS	268,211		0	268,211	0

* A corporation having a net operating loss (NOL) carryover from any taxable year must apply the special rule of §170(d)(2)(B). The rules are designed to prevent a double tax benefit through interaction of NOL and charitable contribution carryovers. The excess charitable deduction can reduce taxable income only once. Under these rules, a corporation's charitable contributions carryover (but not the NOL carryover) must be reduced, to the extent the charitable contribution deduction, in computing the taxable income of an intervening year, would increase the NOL to a succeeding year.

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY**AMERIWAY - 0077586**

1010018162



DEPARTMENT USE ONLY

**RCT-101 08-18 PAGE 1 OF 4
PA CORPORATE NET INCOME TAX REPORT 2018**

IRS Filing Type A = 1120 B = 1120S C = Other A

STEP A

Tax Year Beginning 01012018 Tax Year Ending 12312018

STEP B

Amended Report	Y	52-53 Week Filer	N	First Report	N	File Period Change
Federal Extension Granted	N	Address Change	N	KOZ/EIP/SDA Credit	N	S Corp Taxable Built-in Gains
		Change Fed Group	N	Royalty/Related Interest	N	Section 381/382/Merger
				Add-Back (Act 52 of 2013)		NOLS/Regulated Inv. Co./ Sub Paragraph 18

STEP C

Revenue ID	0000000000	Parent Corporation EIN
Federal EIN	814134438	
Business Activity Code	488990	
Corporation Name	AMERIWAY CORPORATION	
Address Line 1	SUITE 223	
Address Line 2	2424 E YORK ST	
City	PHILADELPHIA	
State	PA	Province
ZIP	19125	Country Code
		Foreign Postal Code

STEP D: PA CORPORATE NET INCOME TAX

USE WHOLE DOLLARS ONLY

A. Tax Liability
from Page 2
(can not be less than zero)

B. Estimated
Payments &
Credits on Deposit

C. Restricted
Credits

STEP E:
Payment Due/Overpayment
Calculation: A minus B minus C
See instructions.

CNI

□

□

□

□

STEP F: Transfer/Refund Method (See instructions.)

E-File Opt Out (See instructions.)

N

- Transfer:** Amount to be credited to the next tax year after offsetting all unpaid liabilities.
- Refund:** Amount to be refunded after offsetting all unpaid liabilities.

STEP G: Corporate Officer (Must sign affirmation below)

NAME XIYAN ZHANG
 PHONE 2153958756
 EMAIL XZHANG@STRATUMLAW.COM

FORM 1024
 BARCODE 0000

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. If this report is an amended report, the taxpayer hereby consents to the extension of the assessment period for this tax year to one year from the date of filing of this amended report or three years from the filing of the original report, whichever period last expires, and agrees to retain all required records pertaining to that tax and tax period until the end of the extended assessment period, regardless of any statutory provision providing for a shorter period of retention. For purposes of this extension, an original report filed before the due date is deemed filed on the due date. I am authorized to execute this consent to the extension of the assessment period.

Corporate Officer Signature
 XIYAN ZHANG

Date
 02032020

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

AMERIWAY - 0077587

1010018262

REVENUE ID 0000000000
TAX YEAR END 12312018 NAME AMERIWAY CORPORATION
 RCT-101 08-18 PAGE 2 OF 4 PA CORPORATE NET INCOME TAX REPORT 2018

SECTION A: BONUS DEPRECIATION

USE WHOLE DOLLARS ONLY

(Include REV-1834, Schedule C-8 and C-9, if claiming bonus depreciation.)

- | | | |
|--|---|--------------------------|
| 1. Current year federal depreciation of 168k prop. | 1 | <input type="checkbox"/> |
| 2. Current year adjustment for disposition of 168k prop. | 2 | <input type="checkbox"/> |
| 3. Other adjustments. | 3 | <input type="checkbox"/> |

SECTION B: PA CORPORATE NET INCOME TAX

- | | | |
|--|---|--------|
| 1. Income or loss from federal return on a separate-company basis. | 1 | -83454 |
|--|---|--------|

2. DEDUCTIONS:

- | | | |
|---|----|--------------------------|
| 2A. Corporate dividends received (from REV-798, Schedule C-2, Line 7). | 2A | <input type="checkbox"/> |
| 2B. Interest on U.S. securities (GROSS INTEREST minus EXPENSES). | 2B | <input type="checkbox"/> |
| 2C. Current yr. addtl. PA deprec. plus adjust. for sale (REV-1834, Sched. C-8, Line 8). | 2C | <input type="checkbox"/> |
| 2D. Other (from REV-860, Schedule OD) See instructions. | 2D | <input type="checkbox"/> |

TOTAL DEDUCTIONS - Add Lines 2A through 2D and enter the result on Line 2. 2

3. ADDITIONS:

- | | | |
|--|----|--------------------------|
| 3A. Taxes imposed on or measured by net income (from REV-860, Schedule C-5, Line 6). | 3A | <input type="checkbox"/> |
| 3B. Employment incentive payment credit adjustment (Include Schedule W). | 3B | <input type="checkbox"/> |
| 3C. Current year bonus depreciation (from REV-1834, Sched. C-8, Line 3). | 3C | <input type="checkbox"/> |
| 3D. Intangible expense or related interest expense (REV-802, Sched. C-6, Line 11; must include REV-802). | 3D | <input type="checkbox"/> |
| 3E. Other (from REV-860, Schedule OA) See instructions. | 3E | <input type="checkbox"/> |

TOTAL ADDITIONS - Add Lines 3A through 3E and enter the result on Line 3. 3

- | | | |
|--|----|--------------------------|
| 4. Income or loss with Pennsylvania adjustments (Line 1 minus Line 2 plus Line 3). | 4 | -83454 |
| 5. Total nonbusiness income or loss (from REV-934, Column C, Total; must include REV-934). | 5 | <input type="checkbox"/> |
| 6. Income or loss to be apportioned (Line 4 minus Line 5). | 6 | -83454 |
| 7. Apportionment (from Schedule C-1, 1C, or 2C if using Special Apportionment). | 7 | 1.000000 |
| 8. Income or loss apportioned to PA (Line 6 times Line 7). | 8 | -83454 |
| 9. Nonbusiness income or loss allocated to PA (from REV-934, Column A, Total; must include REV-934). | 9 | <input type="checkbox"/> |
| 10. PA taxable income or loss after apportionment (Line 8 plus Line 9). | 10 | -83454 |
| 11. Total net operating loss deduction (from RCT-103, Part A, Line 4). | 11 | <input type="checkbox"/> |
| 12. PA taxable income or loss (Line 10 minus Line 11). | 12 | -83454 |
| 13. PA corporate net income tax (Line 12 times 0.0999). If Line 12 is less than zero, enter "0". | 13 | <input type="checkbox"/> |
| 14. Less: Credit for tax paid by affiliate(s) for intangible expense or related interest expense (from REV-803, Sched. C-7, Line 9; must include REV-803). | 14 | <input type="checkbox"/> |
| 15. Tax Due (Line 13 minus Line 14). | 15 | <input type="checkbox"/> |

SCHEDULE C-1: Apportionment Schedule For Corporate Net Income Tax (Include RCT-106.) *

Sales Factor				Special Apportionment	
Sales - PA	1A	848839	1C	1.000000	Numerator 2A <input type="checkbox"/>
Sales - Total	1B	848839			Denominator 2B <input type="checkbox"/>
					Apportionment 2C <input type="checkbox"/>
					Proportion <input type="checkbox"/>

* Refer to REV-1200, PA Corporate Net Income Tax Instructions, found at www.revenue.pa.gov.



1010018262

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

1010018262

AMERIWAY - 0077588

1010018362

REVENUE ID 0000000000
TAX YEAR END 12312018 NAME AMERIWAY CORPORATION
 RCT-101 08-18 PAGE 3 OF 4 PA CORPORATE NET INCOME TAX REPORT 2018

SECTION C: CORPORATE STATUS CHANGES**Final Report****N****PA Corporations:**

Did you ever transact business anywhere?

N If yes, enter date all business activity ceased

Did you hold assets anywhere?

N If yes, enter date of final disposition of assets***Foreign Corporations:**

Did you ever transact business in PA on your own or through an unincorporated entity?

N If yes, enter date PA business activity ceased

Did you hold assets in PA on your own or through an unincorporated entity?

N If yes, enter date of final disposition of PA assets*

*Schedule of Disposition of Assets, REV-861, must be completed and filed with this report.

Has the corporation sold or transferred in bulk, 51 percent or more of any class of assets? (See instructions.)

N

If yes, enter the following information. (Include a separate schedule if additional space is needed.)

Purchaser Name

Address Line 1

Address Line 2

City

Province

State

Country Code

ZIP

Foreign Postal Code

SECTION D: GENERAL INFORMATION QUESTIONNAIRE

Describe corporate activity in PA

NONE

Describe corporate activity outside PA

Other states in which **taxpayer** has activity

State of Incorporation

DE

Incorporation Date

10142016

1. Does any corporation, individual or other business entity hold all or a majority of the stock of this corporation? **1 N**
2. Does this corporation own all or a majority of stock in other corporations? If yes, include REV-798, Schedule X. **2 N**
3. Is this **taxpayer** a partnership or other unincorporated entity that elects to file federal **taxes** as a corporation? **3 N**
4. Has the federal government changed **taxable income** as originally reported for any prior period for which reports of change have not been filed in PA? **4 N**

If yes: First Period End Date:

Last Period End Date:

Accounting Method - Federal **Tax Return**

Accounting Method - Financial Statements

C

A = Accrual

C = Cash

O = Other

C

A = Accrual

C = Cash

O = Other

Other

Other



1010018362

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

1010018362

AMERIWAY - 0077589

1010018462

REVENUE ID 0000000000
TAX YEAR END 12312018 NAME AMERIWAY CORPORATION
RCT-101 08-18 PAGE 4 OF 4 PA CORPORATE NET INCOME TAX REPORT 2018

SCHEDULE OF REAL PROPERTY IN PA (Include a separate schedule if additional space is needed.)

Did you own or rent property in PA titled to the corporation or any Single Member LLC during this filing period?

If yes, the below section must be completed.

O = Own

R = Rent

Street Address

City

County

KOZ/KOEZ

CORPORATE OFFICERS

(See instructions.)

Must provide requested information
for all filled officer positions.

President/Managing Partner

Vice President

Secretary

Treasurer/Tax Manager

SSN

Last Name

First Name

MI

PREPARER'S INFORMATION

Mail to Preparer

N

Firm Federal EIN

471500758

Firm Name

SARA SAM CPA PC

Address Line 1

2424 E YORK STREET 301C

Address Line 2

City

PHILADELPHIA

Province

State

PA

Country Code

ZIP

19125

Foreign Postal Code

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been prepared by me and to the best of my knowledge and belief is a true, correct and complete report.

Tax Preparer's Signature**Date**

02102020

INDIVIDUAL PREPARER

SARA SAM

PHONE

2156678839

EMAIL

PTIN/SSN

P01602029



1010018462

HIGHLY CONFIDENTIAL - ATTORNEY'S EYES ONLY

1010018462

AMERIWAY - 0077590

pennsylvania
DEPARTMENT OF REVENUE

REV-1834 (CT) 08-18

SCHEDULE C-8

ADJUSTMENT FOR BONUS DEPRECIATION

TAX YEAR
BEGINNING 01-01-2018

TAX YEAR
ENDING 12-31-2018

CORPORATION NAME AMERIWAY CORPORATION **REVENUE ID** 0000000000

This Schedule is required to be completed annually and submitted with the RCT-101

1. Unused Bonus Depreciation Balance from prior year:

 - 1A. Unrecovered Bonus Depreciation Balance:
On Qualified Property Acquired in Transactions Where Asset Basis is Carried Over
Date of Transaction: _____ Type of Transaction: _____
Revenue ID of Corporation from Whom Assets Acquired: _____ FEIN: _____

2. Amount of Federal Bonus Depreciation claimed in this **tax year**:
 - 2A. Property placed in service prior to Sept. 28, 2017
 - 2B. Property placed in service on or after Sept. 28, 2017
3. Current Year Bonus Deprec. Addition (Line 2A plus 2B)
TOTAL (Carry to Line 3C, Page 2, of RCT-101)
4. Additional PA Bonus Depreciation Deduction:
 - 4A. Property placed in service prior to Sept. 28, 2017 (MACRS x 3/7)
 - 4B. Property placed in service on or after Sept. 28, 2017 (MACRS w/o regard to Bonus) ..
5. PA Bonus Depreciation Deduction
TOTAL (Line 4A plus 4B)
6. Deduction for Property Which is Fully Depreciated, Sold or Otherwise Disposed:
 - 6A. Property placed in service prior to Sept. 28, 2017 (Schedule C-9 Line 2)
 - 6B. Property placed in service on or after Sept. 28, 2017 (Schedule C-9 Line 4) ..
7. PA Deduction for Property Which is Fully Depreciated, Sold or Otherwise Disposed:
TOTAL (Line 6A plus 6B)
8. PA Bonus Depreciation Deduction (Line 5 plus 7)
TOTAL (Carry to line 2C, Page 2, of RCT-101)
9. Remaining Unused Bonus Depreciation Balance Carry-Forward:
TOTAL (Line 1 plus Line 1A plus Line 3 minus Line 8)



2018 BIRT-EZ

CITY OF PHILADELPHIA - DEPARTMENT OF REVENUE
2018 BUSINESS INCOME & RECEIPTS TAX
 For business conducted 100% in Philadelphia
 DUE DATE: APRIL 15, 2019

 City Account Number
 3253796

 AMERIWAY CORPORATION
 2424 E YORK ST

EIN 814134438

PHILADELPHIA, PA 19125

SSN

Taxpayer E-mail Address

XZHANG@STRATUMLAW.COM

If this is a change of address, file a Change Form and check this box:

If your business terminated in 2018, enter the termination date AND file a CHANGE FORM.

**YOU MUST COMPLETE WORKSHEET "S-EZ"***If this is an amended return place an "X" here:***COMPUTATION OF TAX DUE OR OVERPAYMENT**

1. NET INCOME PORTION OF TAX (from Page 2, Line 6). If there is no tax due, enter "0"	1. 0
2. GROSS RECEIPTS PORTION OF TAX (from Page 2, Line 11). If there is no tax due, enter "0"	2. 1060
3. Tax Due for the 2018 Business Income & Receipts Tax (Line 1 plus Line 2)	3. 1060
4. MANDATORY 2019 BIRT Estimated Payment (See Instructions)	4. 1060
5. Total Due by 4/15/2019 (Line 3 plus Line 4)	5. 2120

ESTIMATED PAYMENTS AND OTHER CREDITS

6a. Include any estimated and/or extension payments of 2018 BIRT previously made, and any credit from overpayment of the 2017 BIRT and/or 2018 NPT return	6a. 679
6b. Credit from Special Credit Schedule (SC). (Cannot exceed amount on Line 3)	6b.
6c. Total payments and credits. (Line 6a plus Line 6b)	6c. 679
7. Net Tax Due (Line 5 less Line 6c). If Line 6c is greater than Line 5, enter "0"	7. 1441
8. Interest and Penalty Refer to web site for current percentage	8.
9. TOTAL DUE including Interest and Penalty (Line 7 plus Line 8). Use payment coupon. Make check payable to: "City of Philadelphia"	9. 1441

OVERPAYMENT OPTIONS If Line 6c is greater than Line 5, enter the amount to be:10a. Refunded. **Do not file a separate Refund Petition**

10a.

10b. Applied to the 2018 Net Profits **Tax** Return

10b.

10c. Applied to the 2019 Business Income & Receipts **Tax**

10c.

Under penalties of perjury, as set forth in 18 PA C.S. §§ 4902-4903 as amended, I swear that I have reviewed this return and accompanying statements and schedules, and to the best of my knowledge and belief, they are true and complete.

Taxpayer Signature _____ Date 02-03-2020 Phone # 215-395-8756

Preparer Signature _____ Date 02-10-2020 Phone # 215-667-8839



2018 BIRT-EZ

TAX COMPUTATION SCHEDULES

City Account Number

3253796

If business is operated inside and outside of Philadelphia, you must file the BIRT Regular return available at www.phila.gov/revenue.

Reminder - You must use the same method (METHOD I or METHOD II) that you elected on the first Business Income & Receipts Tax return filed.

NET INCOME PORTIONPlace "X" in box to indicate a loss.

1. METHOD II. Net Income (or loss) as properly reported to the Federal Government	1.	<input checked="" type="checkbox"/>	83454
OR			
2. METHOD I. Net Income (or loss) in accordance with Accounting System	2.		
3. Statutory Net Income Deduction from Worksheet S-EZ, Line S5, below	3.		
4. Loss Carry Forward, if any	4.		
5. Taxable Income or loss. (Amount on Line 1 OR Line 2 minus Line 3 minus Line 4)	5.	<input checked="" type="checkbox"/>	83454
6. TAX DUE (Line 5 X .0630). If Line 5 is a loss, enter zero here and on Page 1, Line 1	6.		

GROSS RECEIPTS PORTION*Do not report negative numbers for gross receipts.***TAXABLE GROSS RECEIPTS** from:

7a. Sales and/or rentals of tangible personal property	7a.	
7b. Services	7b.	848839
7c. Rentals of real property	7c.	
7d. Royalties	7d.	
7e. Gains on sales of capital business assets	7e.	
7f. Gains on sales of stocks, bonds, etc. (Not applicable to individuals.)	7f.	
7g. Dividends. (Not applicable to individuals.)	7g.	
7h. Interest. (Not applicable to individuals.)	7h.	
7i. Other. (Describe) _____	7i.	
8. TAXABLE GROSS RECEIPTS before Statutory Exclusion. (Add Lines 7a through 7i.) . . .	8.	848839
9. Statutory Exclusion (Lower of Line 8 or \$100,000.00)	9.	100000
10. Net taxable Gross Receipts (Line 8 minus Line 9)	10.	748839
11. TAX DUE. (Line 10 X .001415). Enter here and on Page 1, Line 2	11.	1060

Worksheet S-EZ - Use to calculate Statutory Net Income Deduction

S1. Enter the lower of Line 8 above or \$100,000.00	S1.	100000
S2. Enter Net Income from Line 1 or Line 2. If loss, enter zero	S2.	
S3. Enter Taxable Gross Receipts from Line 8 above	S3.	848839
S4. Divide Line S2 by Line S3. (Cannot be greater than 1.0000)	S4.	
S5. Statutory Net Income Deduction (Line S1 times Line S4. Cannot exceed \$100,000) . . .	S5.	
Enter here and on Line 3, above.		

Name AMERIWAY CORPORATION	SSN/EIN 814134438
DATE TO FILE BY:	04-15-2019
PAYMENT:	\$1,441.00
PAYMENT METHODS:	MAKE CHECK PAYABLE TO THE "CITY OF PHILADELPHIA". PAYMENT OF TAX MUST BE MADE USING THE PREPRINTED COUPONS AND POSTAGE PAID ENVELOPE PROVIDED TO EXISTING TAXPAYERS. PAYMENT OF BPT INCLUDES TAX (NET OF PREPAYMENTS/CREDITS) AND MANDATORY ESTIMATE.
ADDRESS TO FILE:	CITY OF PHILADELPHIA DEPARTMENT OF REVENUE PO BOX 1393 PHILADELPHIA, PA 19105-1393
OTHER INSTRUCTIONS:	DO NOT ATTACH COPIES OF FEDERAL FORMS OR SCHEDULES. ACH DEBITS AND CREDITS ARE ACCEPTED FOR PAYMENT OF NPT OR BPT. FOR INFORMATION IN ENROLLING IN THIS PROGRAM GO TO WWW.PHLIA.GOV/REVENUE IN THE "ELECTRONIC FILING" SECTION OR CALL 215-686-6582.

TAXPAYER RECORDS

Detach here

■ 2018 BIRT and MANDATORY ESTIMATED 2019 BIRT PAYMENT COUPON

Due Date: April 15, 2019

TAXPAYER NAME AMERIWAY CORPORATION
and ADDRESS 2424 E YORK ST STE 223
PHILADELPHIA, PA 19125
CITY ACCOUNT #: 3253796

Interest & Penalties

1441

Total Due

1441



**Make check payable to: "City of Philadelphia"
Include your Account Number on your check or money order.**